



TOWN OF HANSON

Board of Health
542 Liberty Street
Hanson, MA 02341
Tel: 781-293-3138
Fax: 781-294-0884

Application for Percolation Test and Observation Hole

Please print legibly

Date: _____

Fee to be paid at the time of application: \$200.00 – ½ day (up to 4 hours in one day)
\$400.00 – full day (4-8 hrs in one day)

Location of work: _____, Hanson, MA

Existing house on property: _____ Vacant land: _____ Repair: _____
Increase Flow: _____ New Construction: _____

Are there wetlands or streams within 100' of where work is going to take place? _____
If yes, you must contact the Hanson Conservation Office before any field work is started.

Owners Name: _____ Tel: _____

Owners Address (if different then perc. location): _____

Engineer/Reg. Sanitarian: _____ Reg. _____

Tel: _____ Cell: _____

E-Mail Address: _____

Excavator: _____ Cell: _____

Test pit excavation(s) should be completed before the Agent for the Health Office arrives at the site.

Engineer's Signature

Date

All approvals MUST be signed off BEFORE application is submitted to the Board of Health

Treasurer Approval: _____ Date: _____

Conservation Approval: _____ Date: _____

***** For Health Office Use *****

Date Scheduled: _____

Time: _____

Witness By: _____

Revised 5/2015